

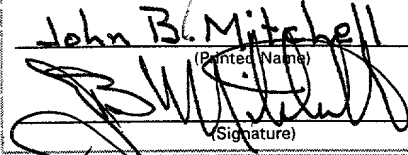
82 01-25-02

Docket No.:  
11899

A

**IN THE UNITED STATES PATENT AND TRADEMARK OFFICE**

Applicant: Dennis P. Silver  
Title: Hinged Unloading Auger for an  
Agricultural Combine  
Appl. No.: Unknown  
Filing Date: Unknown  
Examiner: Unknown  
Art Unit: Unknown

<b>CERTIFICATE OF EXPRESS MAILING</b>	
I hereby certify that this correspondence is being deposited with the United States Postal Service's "Express Mail Post Office To Addressee" service under 37 C.F.R. § 1.10 on the date indicated below and is addressed to: Assistant Commissioner for Patents, Washington, D.C. 20231.	
<b>EL817113365US</b>	<b>1/23/02</b>
(Express Mail Label Number)	(Date of Deposit)
<b>John B. Mitchell</b>	
(Printed Name)	
	
(Signature)	

**UTILITY PATENT APPLICATION**  
**TRANSMITTAL**

Assistant Commissioner for Patents  
Box PATENT APPLICATION  
Washington, D.C. 20231

Sir:

Transmitted herewith for filing under 37 C.F.R. § 1.53(b) is the nonprovisional utility patent application of:

Dennis P. Silver

Enclosed are:

- ☒ [ X ] Specification, Claim(s), and Abstract (14 pages).
- ☒ [ X ] Informal drawings (5 sheets, Figures 1-7).
- ☒ [ X ] Declaration and Power of Attorney (2 pages).
- ☒ [ X ] Assignment of the invention to Case Corporation.
- ☒ [ X ] Assignment Recordation Cover Sheet.
- ☒ [ X ] Information Disclosure Statement.
- ☒ [ X ] Form PTO-1449 with copies of 7 listed reference(s).

The filing fee is calculated below:

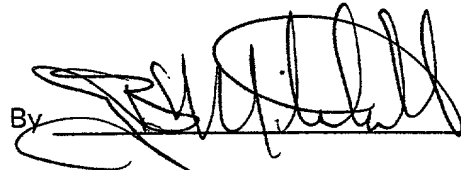
	Claims as Filed	Included in Basic Fee	Extra Claims	Rate	Fee Totals
Basic Fee				\$710.00	\$740.00
Total Claims:	14	- 20	= 0	x \$18.00	= \$0.00
Independents:	2	- 3	= 0	x \$84.00	= \$0.00
If any Multiple Dependent Claim(s) present:				+ \$260.00	= \$0.00
				SUBTOTAL:	= \$740.00
				TOTAL FILING FEE:	= \$740.00

- [ X ] The Assistant Commissioner is hereby authorized to charge the Deposit Account No. 03-1025 in the amount of \$740.00 to cover the filing fee.
- [ ] The required filing fees are not enclosed but will be submitted in response to the Notice to File Missing Parts of Application.
- [ X ] The Assistant Commissioner is hereby authorized to charge any additional fees which may be required regarding this application under 37 C.F.R. §§ 1.16-1.17, or credit any overpayment, to Deposit Account No. 03-1025. Should no proper payment be enclosed herewith, as by a check being in the wrong amount, unsigned, post-dated, otherwise improper or informal or even entirely missing, the Assistant Commissioner is authorized to charge the unpaid amount to Deposit Account No. 03-1025.

Please direct all correspondence to the undersigned attorney or agent at the address indicated below.

Respectfully submitted,

Date 1/23/02

By 

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